FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	(See instructions)			Office use only
NAME OF COMMITTEE (in			imple: If typying, type r the lines	12FE4M5
REFORM PAR	TY OF THE UNITED ST	ATES OF AMERI	CA	
		11111		
ADDRESS (number and	street) 3961 MERR	ELL RD		
X (Check if addr is changed)	PMB #456 DALLAS			TX 75229 _
		CITY▲	•	STATE▲ ZIP CODE ▲
committee's e-ma				
COMMITTEE'S WEB	PAGE ADDRESS (URL)			
http://www.re	formparty.org	11111		
		1 1 1 1 1 1		
COMMITTEE'S FAX N 2143576556	NUMBER			
2. DATE 0 6		5		
3. FEC IDENTIFICATION NUMBER C C00331314				
4. IS THIS STATEMENT X NEW (N) OR AMENDED (A)				
I certify that I have exami	ined this Statement and to the be	est of my knowledge a	nd belief it is true, correct and	d complete
Type or Print Name of	Treasurer Beverly	Kennedy		
Signature of Treasurer	Electronically Filed by	Beverly Kennedy	<u> </u>	Date 08 / DDD / YYYYY
NOTE: Submission of fa	·		the person signing this State	ement to the penalties of 2 U.S.C. S437g.
Office Use Only			For further information c Federal Election Commiss Toll Free 800-424-9530	